

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
FEC MAIL CENTER

2008 SEP 2 AM 8:43

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF PETER THERON

ADDRESS (number and street)

1021 SEQUOIA TRAIL

Check if different
than previously
reported. (ACC)

MADISON

WI

53713

SECRETARY OF THE SENATE
08 SEP 12 PM 2:36

2. FEC IDENTIFICATION NUMBER ▼

C00450353

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT

X

NEW
(N)

OR

AMENDED
(A)

WI

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

X

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY
09 / 09 / 2008

in the
State of

WI

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY
09 / 09 / 2008

in the
State of

WI

5. Covering Period

MM / DD / YYYY
07 / 01 / 2008

through

MM / DD / YYYY
08 / 20 / 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Daniel Peter Theron

Signature of Treasurer

Daniel Peter Theron

Date

MM / DD / YYYY
08 / 25 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

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